01/24/2007 12:54

Image# 27930069851

FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full)	USE FEC MAILING LABEL OR TYPE OR PRINT	Example:If typi over the lines	ng, type		
TENET HEALTHCARE COF	RPORATION PAC				
			1 1 1 1 1 1		
ADDRESS (number and street)	13737 Noel Road, Suite 10	0			
Check if different				1 1 1 1 1 1	
than previously reported. (ACC)	Dallas		LTX	75240	
2. FEC IDENTIFICATION NUM	BER ♥ CIT	TY 🛕	STAT	EA ZIPC	ODE 🛕
C00119354		S THIS REPORT	NEW (N) OR	X AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Due On:	20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:	Mar	r 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	(Non-Election Year Only)
April 15 Quarterly Report(Q	1)	20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
July 15 Quarterly Report(Q:		Primary (1		General (12G)	Runoff (12R)
October 15 Quarterly Report(Q	Report for the: 3)	Convention	n (12C)	Special (12G)	
X January 31 Quarterly Report(YE		on on		in th State	
July 31 Mid-Year Report(Non-election Year Only) (MY)	Post -Election	General (3	30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Report for the:			in th	e T
(:=::)	Election	on on		State	
5. Covering Period 1 1	28 2006	through	12	31 2006	
I certify that I have examined this F	Report and to the best of my know	owledge and belief it	is true, correct and c	omplete.	
Type or Print Name of Treasurer	Mr. Todd Plott				
Signature of Treasurer Electron	nically Filed by Mr. Todd Plot	it	Date	01 24	2007
NOTE : Submission of false, error	neous, or incomplete information	n may subject the pe	erson signing this Rep	oort to the penalties of 2	U.S.C 437g.
Office Use Only				FEC FO (Rev. 02/	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name TENET HEALTHCARE CORPORATION PAC D D " D 28 12 2006 3 1 2006 1.1 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand [°]2006 26410.20 January 1 (b) Cash on Hand at 3376.44 Begining of Reporting Period 2814.52 40605.76 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6190.96 67015.96 6(a) and 6(c) for Column B) 1000.00 61825.00 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period 5190.96 5190.96 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name

TENET HEALTHCARE CORPORATION PAC

(subtract Line 18(c) from Line 19)

2^D8 3^D1 м N 1 1 м м 1 2 2006 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 2629.52 21181.92 (i) Itemized (use Schedule A) 185.00 19423.84 (ii) Unitemized (iii) TOTAL (add 2814.52 40605.76 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 0.00 0.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 2814.52 40605.76 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 2814.52 40605.76 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 2814.52 40605.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:		
	(a) Shared Federal/Non-Federal Activity (from Schedule H4) (i) Federal Share	0.00	0.00
	(i) Federal Strate		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	0.00
	Expenditures(c) Total Operating Expenditures	0.00	0.00
	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
2.	Transfers to Affiliated/Other Party		
2	Committees Contributions to	0.00	0.00
٥.	Federal Candidates/Committees	1000.00	39250.00
4	and Other Political Committees	1000.00	39230.00
	(use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d))	0.00	0.00
	(use Schedule F)	0.00	0.00
6.	Loan Repayments Made	0.00	0.00
	Loans Made Refunds of Contributions To:	0.00	0.00
Ο.	(a) Individuals/Persons Other	0.00	0.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	22575.00
0.	Federal Election Activity (2 U.S.C 431(20))		
٠.	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	1000.00	61825.00
	Total Federal Disbursements		
2			
2.	(subtract Line 21(a)(ii) from Line 30(a)(ii)		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	2814.52	40605.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	2814.52	40605.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
88. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 6/32
ITEMIZED RECEIPTS		or each category of the		(check only one)
••	EMIZED RECEIL 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	ny information copied from such Reports and St	atements may	y not he sold or used by any ners	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
	TENET HEALTHCARE CORPORATIO	N PAC		
A.	Full Name (Last, First, Middle Initial) ELIZABETH LAMKIN			Date of Receipt
	Mailing Address 31 WICKLOW DRIVE			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1025760416255
	HILTON HEAD IS.	SC	29928	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer HILTON HEAD HOSPITAL	Occupation CEO	1	7
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1	520.00	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	0 0		Weekly)
В.	Full Name (Last, First, Middle Initial) DALE ARMSTRONG			Date of Receipt
	Mailing Address 1135 CARTHAGE ST			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1025775816255
	SANFORD	NC	27330	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer CENTRAL CAROLINA HOSPITAL	Occupation CEO	ו	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) JENNIFER DALEY			Date of Receipt
	Mailing Address 5 CANDLEWICK CLOS	SE		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR1039838816255
	LEXINGTON	MA	02421-4307	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.			78.00
	Name of Employer TENET HEALTHCARE CORPORAT- ION-HQ	Occupation SVP,CLII	n NICAL QUALITY/CMO	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		1014.00	P/R Deduction (\$39.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			158.00
\vdash				
ΙT	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)

S	CHEDULE A (FEC Form 3X)		lles serente este de la la (e)	FOR LINE NUMBER: PAGE 7/32
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	TENET HEALTHCARE CORPORATIO	N PAC		
A.	Full Name (Last, First, Middle Initial) JOHN J FERRELLI			Date of Receipt
	Mailing Address RANCHO MIRAGE			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1240924716255
	Rancho Mirage	CA	92270-4138	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer JOHN F. KENNEDY MEMORIAL HOSPITAL	Occupation CEO	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		520.00	P/R Deduction (\$20.00 Bi-
	Other (specify)	0 0	020.00	Weekly)
В.	Full Name (Last, First, Middle Initial) SHELLEY GILES			Date of Receipt
	Mailing Address 3803 STOCKTON LN			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1479664416255
	DALLAS	TX	75287-4919	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation DIR	ו	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		520.00	P/R Deduction (\$20.00 Bi-
	Other (specify)	0 0	320.00	Weekly)
C.	Full Name (Last, First, Middle Initial) JANIS THAYER			Date of Receipt
	Mailing Address 1735 CRIMSON TERR	ACE		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1481210616255
	BRENTWOOD	CA	94513-2618	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer OTHER EXECUTIVES	Occupation DIR	ı	
			Year-to-Date ▼	
	Primary General		260.00	P/R Deduction (\$10.00 Bi-
	Other (specify) ▼	0 0	260.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			100.00
H				
l T	OTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8/32	
ITEMIZED RECEIPTS			or each category of the	(check only one)
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
_				13 14 15 16 17
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$ \rangle$	TENET HEALTHCARE CORPORATION	N PAC		
	TENET HEALTHOANE OOM ONWING	11710		
_	Full Name (Last, First, Middle Initial)			
A.	CHARLES CONKLIN			Date of Receipt
	Mailing Address 3901 HEARST CASTLE	WAY		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1592857216255
	PLANO	TX	75025-2011	Amount of Each Receipt this Period
	FFO ID combined for all the first		73023 2011	Amount of Each Neceipt this Fehod
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation	1	
		VP	Versite Dete	4
	Receipt For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)	' '	520.00	P/R Deduction (\$20.00 Bi- Weekly)
	Strick (openity) 🔻	0 0	1 1 1 1 1 1 1	
	Full Name (Last, First, Middle Initial)			
В.	RICKY JOHNSTON			Date of Receipt
	Mailing Address 404 N.CHURCH ST			M M / D D / Y Y Y
	01.	01-1-	7'- 0-4-	
	City	State	Zip Code	Transaction ID: PR1592858216255
	MCKINNEY	TX	75069	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Tederal political committee.			
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation		
		1) SYSTEMS	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)	' '	1560.00	P/R Deduction (\$60.00 Bi- Weekly)
	Other (specify)	0 0		(Veekly)
_	Full Name (Last, First, Middle Initial)			
C.	Daniel WALDMANN			Date of Receipt
	Mailing Address 2001 19th Street, NW, #	‡ 5		M M / D D / Y Y Y
	Cit.	04-4-	7:n Oada	
	City Washington	State DC	Zip Code	Transaction ID: PR1814798516255
	•	DC	20009-1346	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		160.00
	Name of Employer TENET HEALTHSYSTEM-TEXAS V			
			rnment Relations	4
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify)		2080.00	P/R Deduction (\$80.00 Bi- Weekly)
	Other (specify)	(Vectory)		
	L			
s	UBTOTAL of Receipts This Page (optional)			320.00
\vdash	ago (optional)			
T	OTAL This Period (last page this line number o	nlv)	•	

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X)			Llas assausta askadula(a)	FOR LINE NUMBER: PAGE 9/32	
	EMIZED RECEIPTS	Use separate schedule(s) or each category of the		(check only one)	
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	
Δ	winformation and them and Department and Cha			13 14 15 16 17	
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	itements may lame and add	rnot be sold or used by any personal ress of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.	
$\overline{}$	NAME OF COMMITTEE (In Full)				
\rangle	TENET HEALTHCARE CORPORATION	N PAC			
Α.	Full Name (Last, First, Middle Initial) LINDA P MCNEILL			Date of Receipt	
	Mailing Address 3901 S. POST OAK AV			M " M / D " D / Y " Y " Y " Y	
	City	State	Zip Code	Transaction ID: PR403500716255	
	NEW ORLEANS	LA	70131-8413	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		10.00	
	Name of Employer MEADOWCREST HOSPITAL	Occupation DIR	1		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		250.00	P/R Deduction (\$10.00 Bi- Weekly)	
— В.	Full Name (Last, First, Middle Initial) MICHAEL HALTER			Date of Receipt	
	Mailing Address 111 RIGHTERS MILL RD			M M	
	City State Zip Code			Transaction ID: PR406763216255	
	ALLENTOWN	PA	19072	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.	C		38.00	
	Name of Employer HAHNEMANN UNIVERSITY HOSP- ITAL	Occupation CEO	1		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		494.00	P/R Deduction (\$19.00 Bi- Weekly)	
<u> </u>	Full Name (Last, First, Middle Initial) EDILBERTO EVANGELISTA			Date of Receipt	
	Mailing Address 4605 WINNETKA CIRCLE			M " M / D " D / Y " Y " Y " Y	
	City	State	Zip Code	Transaction ID: PR407173116255	
	WOODLAND HILLS	CA	91364-4618	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.			20.00	
	Name of Employer TENET HEALTHSYSTEM	Occupation SR REIM	n BURSEMENT SPEC		
	Receipt For:	Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)	
s	LUBTOTAL of Receipts This Page (optional)			68.00	
T-	OTAL This Period (last page this line number of	nlv)	<u> </u>		

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 10 / 32
	EMIZED RECEIPTS		Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIP 19		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	TENET HEALTHCARE CORPORATION	I PAC		
۹.	Full Name (Last, First, Middle Initial) LEONARD ROSENFELD			Date of Receipt
	Mailing Address 12213 PARK BEND DR			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407201316255
	DALLAS	TX	75230-2364	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation VP	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
 3.	Full Name (Last, First, Middle Initial) ROBERT J SCHWEBEL			Date of Receipt
	Mailing Address 5331 E. MOCKINGBIRD	613		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407203416255
	DALLAS	TX	75206-0911	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation VP	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) CINDY L LARKIN			Date of Receipt
	Mailing Address 4716 DE GREY LANE			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407203816255
	PLANO	<u>TX</u>	75093-7443	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		16.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation SR DIR	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	208.00	P/R Deduction (\$8.00 Bi-W-eekly)
s	UBTOTAL of Receipts This Page (optional)			76.00
			<u>^</u>	
T	OTAL This Period (last page this line number or	ıly)	>	

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/32
	EMIZED RECEIPTS		or each category of the	(check only one)
• • •	LIMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
_	[13 14 15 16 17
Ar or	ly information copied from such Reports and Sta for commercial purposes, other than using the n	n for the purpose of soliciting contributions solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)			
	TENET HEALTHCARE CORPORATION	N PAC		
Α.	Full Name (Last, First, Middle Initial) THOMAS WOLF			Date of Receipt
	Mailing Address 2613 MILLINGTON DRI	VE		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407205116255
	PLANO	TX	75093-3560	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		32.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation MGR	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	1 1	416.00	P/R Deduction (\$16.00 Bi-
	Other (specify) ▼	0 0	416.00	Weekly)
В.	Full Name (Last, First, Middle Initial) HANK D IRICK JR.			Date of Receipt
	Mailing Address 3305 ELAM CT			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407205816255
	PLANO	TX	75093-8087	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation SR DIR	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial)			
C.	WILLIAM R WATTS			Date of Receipt
	Mailing Address 7504 DANFIELD CT			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407209416255
	DALLAS	TX	75252-6823	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation SR DIR	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General	1 1	000.00	P/R Deduction (\$10.00 Bi-
	Other (specify) ▼	0 0	260.00	Weekly)
s	UBTOTAL of Receipts This Page (optional)			72.00
$\overline{}$				

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 12/32			
ITEMIZED RECEIPTS		or each category of the		(check only one)		
•••	LIMIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12	_	
_					17	
or	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.		
	NAME OF COMMITTEE (In Full)		_			
$ \rangle$	TENET HEALTHCARE CORPORATION	N PAC				
	TENET TIERETTION TE GOTTI OTTOTION	11710				
_	Full Name (Last, First, Middle Initial)					
A.	CRAIG E SIMS			Date of Receipt		
	Mailing Address 4515 MANNING LANE			M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR407211616255		
	DALLAS	TX	75220-6434	Amount of Each Receipt this Period		
			13220 0404	Amount of Lach neceipt this Feriod	7	
	FEC ID number of contributing federal political committee.	C		38.46	Н	
					-	
	Name of Employer TENET HEALTHSYSTEM-TEXAS	Occupation	1			
		1	Versile Bets	_		
	Receipt For: Primary General	Aggregate	Year-to-Date ▼			
	Other (specify)	' '	499.98	P/R Deduction (\$19.23 Bi- Weekly)		
	Carlot (openity) 🔻	0 0	1 1 1 1 1 1 1	11 55,		
	Full Name (Last, First, Middle Initial)				_	
В.				Date of Receipt		
	Mailing Address 7817 PENCROSS LANI			M M / D D / Y Y Y Y		
	011	01-1-	7'- 0-4-			
	City	State	Zip Code	Transaction ID: PR407214516255		
	DALLAS	TX	75248-3108	Amount of Each Receipt this Period	-	
	FEC ID number of contributing federal political committee.	C		40.00	Н	
	rederal political committee.				1	
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation	า			
		VP				
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼	' '	520.00	P/R Deduction (\$20.00 Bi- Weekly)		
	Other (specify)	0 0		VV CERTY)		
_	Full Name (Last, First, Middle Initial)			+		
C.	JOHN B MCDONALD			Date of Receipt		
	Mailing Address 2016 PEMBROKE AVE	•		M M / D D / Y Y Y Y		
	Cit.	01-1-	7:- Code			
	City	State TX	Zip Code 76110-1236	Transaction ID: PR407215816255		
	FORT WORTH	1/	70110-1230	Amount of Each Receipt this Period	7	
	FEC ID number of contributing federal political committee.	C		40.00	Н	
	Name of Employer TENET HEADQUARTERS OFFICE Receipt For:				-	
			า			
			ENERAL COUNSEL	_		
			e Year-to-Date ▼			
	Primary General Other (specify)		520.00	P/R Deduction (\$20.00 Bi- Weekly)		
	Other (specify)	0 0		Wedny)		
	L				7	
s	UBTOTAL of Receipts This Page (optional)			118.46		
\vdash	as				i	
T	TOTAL This Period (last page this line number only)					

SCHEDULE A (FEC Form 3X)			Use separate schedule(s)	FOR LINE NUMBER: PAGE 13/32
TEMIZED RECEIPTS			or each category of the	(check only one)
• •			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Stat- for commercial purposes, other than using the na	ements may ame and add	not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	TENET HEALTHCARE CORPORATION	PAC		
۹.	Full Name (Last, First, Middle Initial) WAYNE E COBB			Date of Receipt
	Mailing Address 4001 ORCHID LANE			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407216416255
	MANSFIELD	TX	76063-5577	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation MGR	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) ROBIN L MALLETTE			Date of Receipt
	Mailing Address 616 STONE CANYON			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407218316255
	IRVING	TX	75063-6327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation MGR	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) TERESA L HUSKEY			Date of Receipt
	Mailing Address 4333 PERSHING AVE			M M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407218616255
	FT WORTH	TX	76107-4243	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation SR DIR	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			60.00
	, 5 (17		<u> </u>	
T	OTAL This Period (last page this line number on	ly)	>	

SCHEDULE A (FEC Form 3X)				FOR LINE NUMBER: PAGE 14 / 32
	· ·		Use separate schedule(s) or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			, ,	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the	atements may	not be sold or used by any person	on for the purpose of soliciting contributions
or		name and add	aress or any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
/	TENET HEALTHCARE CORPORATION	N PAC		
	Full Name (Last, First, Middle Initial)			
A.	SHERRY J HENDERSON			Date of Receipt
	Mailing Address 25 NIGHT HERON PL			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407219716255
	NEWTON	NC	28601	Amount of Each Receipt this Period
		110	20001	Amount of Each Neceipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer FRYE REGIONAL MEDICAL CEN-	Occupation	n	
	TER	CFO		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General		260.00	P/R Deduction (\$10.00 Bi-
	Other (specify)			Weekly)
_	Full Name (Last, First, Middle Initial)			
В.	SEARCY JOHNSON			Date of Receipt
	Mailing Address 400 HUNTERS RIDGE	CIRCEL		M M / D D / Y Y Y
	City	State	Zip Code	Transaction ID: PR407219916255
	COPPELL	TX	75019	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1	16.00
	federal political committee.	C		16.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation	n	
		DIR		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify)		208.00	P/R Deduction (\$8.00 Bi-W- eekly)
	Other (specify)	0 0	0 0 0 0 0 0 0	Certy)
<u> </u>	Full Name (Last, First, Middle Initial) ROBERT SMITH			Date of Receipt
J.	Mailing Address 2723 LAKERIDGE			M M / D D / Y Y Y Y
	Z725 EARCHIDGE			
	City	State	Zip Code	Transaction ID: PR407220016255
	CARROLLTON	TX	75006-4723	Amount of Each Receipt this Period
	FEC ID number of contributing	С		50.00
	federal political committee.	C		30.00
	Name of Employer TENET HEALTHSYSTEM-TEXAS	Occupation VP	n	
	Receipt For:		e Year-to-Date ▼	-
	Primary General	gg. ogulo		P/R Deduction (\$25.00 Bi-
	Other (specify)		900.00	Weekly)
	·			
Г				20.00
s	UBTOTAL of Receipts This Page (optional)			86.00
\vdash				-

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 32 (check only one) X 11a 11b 11c 12 13 14 15 16 17
An or	y information copied from such Reports and Sta for commercial purposes, other than using the na	tements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORATION	I PAC		
۹.	Full Name (Last, First, Middle Initial) JOE D THOMASON Millian Address 4000 DAMOCATE OF			Date of Receipt
	Mailing Address 4006 RAMSGATE CT			M M / D D / Y Y Y Y
	City	State TX	Zip Code 76034-4473	Transaction ID: PR407222116255 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	70004 4470	20.00
	Name of Employer RHD MEMORIAL MEDICAL CENT- ER	Occupation CEO		
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) ROBERT S HENDLER Mailing Address 11122 W RICKS CIRCL			Date of Receipt
	City	Ctata	Zip Code	
	City DALLAS	State TX	75230-3032	Transaction ID: PR407222816255 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation	AL CMO	
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	P/R Deduction (\$50.00 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) RHONDA ROGERS			Date of Receipt
	Mailing Address 261 CR 2153			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407224416255
	NACOGDOCHES	TX	75965	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NACOGDOCHES MEDICAL CENTER	Occupation CFO	n	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			140.00
т.	OTAL This Period (last page this line number or	nlv)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 16/32
	EMIZED RECEIPTS		or each category of the	(check only one)
	LIVIIZED REOLII 13		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δr	y information copied from such Reports and State	omonte may	y not he sold or used by any perso	
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
\rangle	TENET HEALTHCARE CORPORATION	PAC		
Δ.	Full Name (Last, First, Middle Initial) CONLEY S CERVANTES			Date of Receipt
	Mailing Address 819 CAMBRIDGE MANC	R LANE		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407224716255
	COPPELL	TX	75019-6105	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		24.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation DIR	n	
	Receipt For:		e Year-to-Date ▼	-
	Primary General	7 iggi ogalio		P/R Deduction (\$12.00 Bi-
	Other (specify) ▼	0 0	312.00	Weekly)
3.	Full Name (Last, First, Middle Initial) GARY ROBINSON			Date of Receipt
	Mailing Address 3412 DREXEL DRIVE			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR407225816255
	HIGHLAND PARK	TX	75205-2904	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation DEPUTY	n GENERAL COUNSEL	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
).	Full Name (Last, First, Middle Initial) DEBRA L ANDONIE-WALL			Date of Receipt
	Mailing Address 2687 CLEAR SPRINGS	CT		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR407226216255
	RICHARDSON	TX	75082-4210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation SR DIR	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			104.00
			·	
T	OTAL This Period (last page this line number on	lv)	>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 17/32			
	EMIZED RECEIPTS		or each category of the	(check only one)			
••	LIMIZED REGEN 13		Detailed Summary Page	X 11a 11b 11c 12			
Δ	information and them and Department and Ch			13 14 15 16 17			
or	ny information copied from such Reports and Sta for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.			
	NAME OF COMMITTEE (In Full)						
$ \rangle$	TENET HEALTHCARE CORPORATION	N PAC					
\angle							
	Full Name (Last, First, Middle Initial)			1 5. 75			
Α.	STEPHANIE SLOGGETT-O'DELL	VED DD		Date of Receipt			
	Mailing Address 779 SOUTH BELLFLOV	VERDR		M M / D D / Y Y Y Y			
	City	State	Zip Code	Transaction ID: PR407227016255			
	SPRINGFIELD	MO	65809-1109	Amount of Each Receipt this Period			
	FEC ID number of contributing			40.00			
	federal political committee.	C		40.00			
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation VP	n				
	Receipt For:	1	e Year-to-Date ▼	-			
	Primary General	00 0		P/R Deduction (\$20.00 Bi-			
	Other (specify) ▼	0 0	520.00	Weekly)			
				-			
В.	Full Name (Last, First, Middle Initial) DOUGLAS E RABE			Date of Receipt			
	Mailing Address 9923 CAPRIDGE DR			M " M / D " D / Y " Y " Y " Y			
	Cit.	01-1-	7in Ondo	DD 4070070 400F5			
	City	State TX	Zip Code	Transaction ID: PR407227316255			
	DALLAS	17	75238-3469	Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		40.00			
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation VP	n				
	Receipt For:	1	e Year-to-Date ▼	_			
	Primary General	Ayyreyale	r real-10-Date V	B/B Doduction (\$20.00 Bi			
	Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)			
				'			
_	Full Name (Last, First, Middle Initial)			Data of Resoint			
C.	GARRY M OLNEY Mailing Address 2708 ISLAND LEDGE (YOVE		Date of Receipt			
	Mailing Address 2708 ISLAND LEDGE C	OVE		W - W / D - D / Y - Y - Y			
	City	State	Zip Code	Transaction ID: PR407234316255			
	AUSTIN	TX	78746-1982	Amount of Each Receipt this Period			
	FEC ID number of contributing	<u> </u>		40.00			
	federal political committee.	C		40.00			
	Name of Employer	Occupation	n	\dashv			
	Name of Employer TENET HEADQUARTERS OFFICE	VP					
	Receipt For:	Aggregate	e Year-to-Date ▼				
	Primary General		520.00	P/R Deduction (\$20.00 Bi-			
	Other (specify)		320.00	Weekly)			
s	SUBTOTAL of Receipts This Page (optional)						
\vdash							
т	TOTAL This Period (last page this line number only)						

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 18/32		
ITEMIZED RECEIPTS		or each category of the		(check only one)		
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17		
Ar	y information copied from such Reports and Sta	atements may	not be sold or used by any pers	on for the purpose of soliciting contributions		
or	for commercial purposes, other than using the r	name and add	dress of any political committee to	solicit contributions from such committee.		
\setminus	NAME OF COMMITTEE (In Full)					
	TENET HEALTHCARE CORPORATION					
A.	Full Name (Last, First, Middle Initial) BARRY G WEINBAUM			Date of Receipt		
	Mailing Address 2670 HIDDEN VALLEY	ROAD		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR407235316255		
	LA JOLLA	CA	92037-4025	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	C		40.00		
	Name of Employer TENET HEALTHSYSTEM	Occupation CEO	ו			
	Receipt For:	Aggregate	Year-to-Date ▼			
	Primary General		520.00	P/R Deduction (\$20.00 Bi-		
	Other (specify) 🔻		320.00	Weekly)		
В.	Full Name (Last, First, Middle Initial) JOHN QUINN			Date of Receipt		
	Mailing Address 1138 PINE VALLEY RC	AD		M M / D D / Y Y Y Y		
	City	State	Zip Code	Transaction ID: PR407236016255		
	GRIFFIN	GA	30224	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	С		20.00		
	Name of Employer SPALDING REGIONAL HOSPITAL	Occupation CEO	1			
	Receipt For:	Aggregate	e Year-to-Date ▼			
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)		
	Full Name (Last, First, Middle Initial)					
C.	WALT MICKENS			Date of Receipt		
	Mailing Address 116 DOCKSIDE CIRCL	E		M M / D D / Y Y Y		
	City	State	Zip Code	Transaction ID: PR407237616255		
	CORAL SPRINGS	FL	33327	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee. Name of Employer WEST BOCA MEDICAL CENTER Receipt For: Agg			20.00		
			1			
			Year-to-Date ▼			
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)		
				90.00		
s	UBTOTAL of Receipts This Page (optional))	80.00		
1 -	TOTAL This Period (last page this line number only)					

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 19/32
ITEMIZED RECEIPTS		or each category of the	(check only one)	
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Ar	ny information copied from such Reports and Stat	ements may	not be sold or used by any perso	n for the purpose of soliciting contributions
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)	D40		
	TENET HEALTHCARE CORPORATION	PAC		
_	Full Name (Last, First, Middle Initial)			
Α.	ANDREA L WOZNIAK			Date of Receipt
	Mailing Address 3181 SAND MARSH LN			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407239416255
	AWENDAW	SC	29466	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer EAST COOPER REGIONAL MEDI-	Occupation CEO	n	
	CAL CENTER Receipt For:		e Year-to-Date ▼	
	Primary General		260.00	P/R Deduction (\$10.00 Bi-
	Other (specify)	0 0	260.00	Weekly)
В.	Full Name (Last, First, Middle Initial) WILLIAM C HENNING			Date of Receipt
	Mailing Address 2735 LONG GROVE DR	IVE		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407244716255
	MARIETTA	GA	30062-8721	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer CENTENNIAL MEDICAL CENTER	Occupation CEO	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General	-	520.00	P/R Deduction (\$20.00 Bi-
	Other (specify)	0 0		Weekly)
_	Full Name (Last, First, Middle Initial) RALPH ALEMAN			Date of Receipt
U.	Mailing Address 7588 NW 51ST PLACE			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407245316255
	CORAL SPRINGS	FL	33067-2053	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer TENET HEALTHSYSTEM	Occupation MARKET	n VICE PRESIDENT	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
	Other (specify)	1 1	0 0 0 0 0 0 0	vveekly)
s	UBTOTAL of Receipts This Page (optional)			100.00
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T	OTAL This Period (last page this line number on	ly)	>	

SC	HEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 20 / 32
ITEMIZED RECEIPTS		or each category of the		(check only one)
•••	imized Heden 10		Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δnv	rinformation copied from such Reports and St	atements may	y not he sold or used by any ners	
or f	or commercial purposes, other than using the	name and ado	dress of any political committee to	o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
TENET HEALTHCARE CORPORATION PAC				
Α. ͺ	Full Name (Last, First, Middle Initial) A. ALEX CONTRERAS-SOTO			Date of Receipt
-	Mailing Address 3363 SW 180 WAY	Otata	7. 0.4	M M / D D / Y Y Y Y
	City CAROL CITY	State FL	Zip Code	Transaction ID: PR407246916255
-		1 5	33029	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
Ī	Name of Employer PALMETTO GENERAL HOSPITAL	Occupation COO	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
				Date of Receipt
Ī	Mailing Address 8540 N.LAKE DASHA [DRIVE		M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR407247416255
	MARGATE	<u>FL</u>	33324	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
İ	Name of Employer FLORIDA MEDICAL CENTER	Occupation CEO	1	
Ī	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) GARRY L GAUSE			Date of Receipt
	Mailing Address 1150 LAKE COLANY L	ANE		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407248716255
	VESTAVIA HILLS	AL	35242-7423	Amount of Each Receipt this Period
				20.00
Ī			1	
Ī			Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
SU	IBTOTAL of Receipts This Page (optional)			80.00
	TAL This Period (last page this line number of			

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 21 / 32
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	tements may ame and add	y not be sold or used by any perso dress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
$\overline{}$	NAME OF COMMITTEE (In Full)			
\rangle	TENET HEALTHCARE CORPORATION	I PAC		
۹.	Full Name (Last, First, Middle Initial) WILLIAM SEED			Date of Receipt
	Mailing Address 2503 MASON OAKS DR	IVE		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407250216255
	VALRICO	<u>FL</u>	33594-6498	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer TENET HEALTHSYSTEM	Occupation DIR	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) DAVID L ARCHER			Date of Receipt
.	Mailing Address 2594 HOCKSETT COVE			M M / D D / Y Y Y Y
	City	Sity State Zip Code		
	GERMANTOWN	TN	38139-6655	Transaction ID: PR407250416255 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer SAINT FRANCIS HOSPITAL	Occupation MARKET		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		1040.00	P/R Deduction (\$40.00 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) DENNIS R BRUNS			Date of Receipt
	Mailing Address 980 18TH AVE CIRCLE	NW		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407251816255
	HICKORY	NC	28601	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		40.00
	Name of Employer HILTON HEAD HOSPITAL	Occupation CEO	n	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		520.00	P/R Deduction (\$20.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			140.00
T	OTAL This Period (last page this line number or	ıly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 22/32
ITEMIZED RECEIPTS			or each category of the	(check only one)
•••			Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Ar	y information copied from such Reports and St	atements may	not be sold or used by any pers	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	TENET HEALTHCARE CORPORATIO			
A.	Full Name (Last, First, Middle Initial) SUELLEN SMITH			Date of Receipt
	Mailing Address PASO ROBLES			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407254516255
	Paso Robles	CA	93446-9702	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer TWIN CITIES COMMUNITY HOS- PITAL	Occupation COO	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
— В.	Full Name (Last, First, Middle Initial) PAMELA J BUXTON			Date of Receipt
	Mailing Address PALM DESERT			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407255316255
	Palm Desert	CA	92211-0485	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer JOHN F. KENNEDY MEMORIAL HOSPITAL	Occupation CNO	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
<u> </u>	Full Name (Last, First, Middle Initial) STEPHEN L NEWMAN MD, M.D.			Date of Receipt
	Mailing Address 13 NEWCASTLE LANE			M M / D D / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407257716255
	LAGUNA NIGUEL	CA	92677-9328	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		80.00
	Name of Employer OTHER EXECUTIVES		NET CALIFORNIA	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		680.00	P/R Deduction (\$40.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			120.00
H	OTAL This Period (last page this line number of			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 23/32
	EMIZED RECEIPTS		or each category of the	(check only one)
••			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
Δη	y information copied from such Reports and Si	atemente may	y not be sold or used by any pers	
or	for commercial purposes, other than using the	name and add	dress of any political committee to	o solicit contributions from such committee.
\setminus	NAME OF COMMITTEE (In Full)			
	TENET HEALTHCARE CORPORATIO	N PAC		
Α.	Full Name (Last, First, Middle Initial) ALAN E HODGES			Date of Receipt
	Mailing Address 231 COIN DU LESTIN			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407262116255
	SLIDELL	LA	70460-3509	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer NORTHSHORE REGIONAL MEDIC- AL CENTER	Occupation CFO	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	, ,	260.00	P/R Deduction (\$10.00 Bi- Weekly)
		0 0	0 0 0 0 0 0 0	w cony)
В.	Full Name (Last, First, Middle Initial) GARY L HONTS			Date of Receipt
	Mailing Address 29 OGLETHORPE LN			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR407266416255
	HILTON HEAD	SC	29926-4724	Amount of Each Receipt this Period
	HILTON HEAD FEC ID number of contributing federal political committee.	SC	29926-4724	
	FEC ID number of contributing		1 1 1 1 1	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	Occupation COO	1 1 1 1 1	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL	Occupation COO	1	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation COO	n • Year-to-Date ▼	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
c.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER	Occupation COO Aggregate	n • Year-to-Date ▼	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt
	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial)	Occupation COO Aggregate	n • Year-to-Date ▼	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly)
 C.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER	Occupation COO Aggregate	n • Year-to-Date ▼	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt
 C.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU	Occupation COO Aggregate	Year-to-Date ▼ 260.00	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt
C.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU City	Occupation COO Aggregate	Year-to-Date ▼ 260.00 Zip Code	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407268516255
c.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU City ST LOUIS FEC ID number of contributing	Occupation COO Aggregate JFF State MO	Zip Code 63129	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407268516255 Amount of Each Receipt this Period
C .	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU City ST LOUIS FEC ID number of contributing federal political committee. Name of Employer DES PERES HOSPITAL Receipt For:	Occupation COO Aggregate JFF State MO C Occupation CEO	Zip Code 63129	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407268516255 Amount of Each Receipt this Period
c.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU City ST LOUIS FEC ID number of contributing federal political committee. Name of Employer DES PERES HOSPITAL	Occupation COO Aggregate JFF State MO C Occupation CEO	Zip Code 63129	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407268516255 Amount of Each Receipt this Period
 c.	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU City ST LOUIS FEC ID number of contributing federal political committee. Name of Employer DES PERES HOSPITAL Receipt For: Primary General	Occupation COO Aggregate JFF State MO C Occupation CEO	Zip Code 63129	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407268516255 Amount of Each Receipt this Period 38.00 P/R Deduction (\$19.00 Bi-Weekly)
	FEC ID number of contributing federal political committee. Name of Employer HILTON HEAD HOSPITAL Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) MICHELE C MEYER Mailing Address 230 GRIMSLEY N. BLU City ST LOUIS FEC ID number of contributing federal political committee. Name of Employer DES PERES HOSPITAL Receipt For: Primary General	Occupation COO Aggregate JFF State MO C Occupation CEO Aggregate	Zip Code 63129 Year-to-Date ▼ 494.00	Amount of Each Receipt this Period 20.00 P/R Deduction (\$10.00 Bi-Weekly) Date of Receipt M M / D D / Y Y Y Y Y Transaction ID: PR407268516255 Amount of Each Receipt this Period 38.00 P/R Deduction (\$19.00 Bi-

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	Check only one		
Ar	ny information copied from such Reports and Statements for commercial purposes, other than using the name and	may not be sold or used by any perso	n for the purpose of soliciting contributions		
\(\)	NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORATION PAC	address of any political committee to	Solicit contributions from such committee.		
Α.	Full Name (Last, First, Middle Initial) DAVID ANDERSON Mailing Address 44021 GARDNER DR		Date of Receipt		
	City State ROSWELL GA	Zip Code 30004	Transaction ID: PR407270716255 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.	00004	20.00		
	- 1 11 AL	ation RIM-CEO gate Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi-Weekly)		
В.	Full Name (Last, First, Middle Initial) PAUL D ECHELARD Mailing Address 1167 HILLSBORO MILE#614		Date of Receipt		
	City State	State Zip Code			
	WEST PALM BEACH FL	33062	Transaction ID: PR407270916255 Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		38.46		
	Name of Employer GOOD SAMARITAN MEDICAL CE- NTER Receipt For: Primary General Other (specify) ▼ Occup CEO Aggre	ation gate Year-to-Date ▼ 499.98	P/R Deduction (\$19.23 Bi- Weekly)		
_	Full Name (Last, First, Middle Initial)		Data of Dancins		
C.	SAMUEL G HARRIS Mailing Address 933 HAVENHURST		Date of Receipt		
	City State	•	Transaction ID: PR407271116255		
	WEST HOLLYWOOD CA FEC ID number of contributing federal political committee. C	90046-6919	Amount of Each Receipt this Period 20.00		
	Name of Employer TENET HEALTHSYSTEM DIR				
	Receipt For: Primary General Other (specify)	gate Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi- Weekly)		
s	UBTOTAL of Receipts This Page (optional)	·····	78.46		
_	OTAL This Period (last page this line number only)	→			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 25/32
ΙT	EMIZED RECEIPTS		or each category of the	(check only one) X 11a 11b 11c 12
			Detailed Summary Page	$\begin{array}{ c c c c c c c c c c c c c c c c c c c$
An or	y information copied from such Reports and Stat for commercial purposes, other than using the na	ements may	not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
<u> </u>	NAME OF COMMITTEE (In Full)		, , , , , , , , , , , , , , , , , , ,	
\rangle	TENET HEALTHCARE CORPORATION	PAC		
۸.	Full Name (Last, First, Middle Initial) CRAIG C ARMIN			Date of Receipt
	Mailing Address 23510 BERDON STREE	Т		M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407274116255
	WOODLAND HILLS	CA	91367-3004	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		50.00
	Name of Employer TENET HEALTHSYSTEM	Occupation VP	1	
	Receipt For:	Aggregate	e Year-to-Date ▼	7
	Primary General Other (specify) ▼		650.00	P/R Deduction (\$25.00 Bi- Weekly)
3.	Full Name (Last, First, Middle Initial) KAREN GULBENKIAN			Date of Receipt
	Mailing Address SAN CLEMENTE			M " M / D " D / Y " Y " Y " Y
	City	State	Zip Code	Transaction ID: PR407278716255
	San Clemente	CA	92673-3534	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		20.00
	Name of Employer GARDEN GROVE HOSPITAL	Occupation COO	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
 C.	Full Name (Last, First, Middle Initial) MITCHELL ZEVIN			Date of Receipt
	Mailing Address PACIFIC PALISAD			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407279216255
	Pacific Palisad	CA	90272-3123	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer ENCINO-TARZANA REGIONAL	Occupation Dir Bus D		
	MEDICAL CENTER Receipt For:		Year-to-Date ▼	_
	Primary General Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
s	UBTOTAL of Receipts This Page (optional)			90.00
			<u> </u>	
T	OTAL This Period (last page this line number on	ly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 26/32
	EMIZED RECEIPTS		or each category of the	(check only one)
			Detailed Summary Page	X 11a 11b 11c 12 15 16 17
An	y information copied from such Reports and Sta	tements may	not be sold or used by any perso	
or	for commercial purposes, other than using the n	ame and add	dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
/	TENET HEALTHCARE CORPORATION	I PAC		
Δ.	Full Name (Last, First, Middle Initial) CANDACE L MARKWITH			Date of Receipt
	Mailing Address 5657 E THE TOLEDO			M M / D D / Y Y Y Y
	City	State	Zip Code	Transaction ID: PR407280316255
	LONG BEACH	CA	90803-4046	Amount of Each Receipt this Period
	FEC ID number of contributing			
	federal political committee.	C		40.00
	Name of Employer SIERRA VISTA REGIONAL MED-	Occupation CEO	n	
	ICAL CENTER Receipt For:		e Year-to-Date ▼	-
	Primary General	199.19		P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	0 0	520.00	Weekly)
₹	Full Name (Last, First, Middle Initial) MICHELE M FINNEY			Date of Receipt
•	Mailing Address 3751 Katella Avenue			M M / D D / Y Y Y Y
	City	T 11 ID DD407092016255		
	Los Alamitos	State CA	Zip Code 90720-3164	Transaction ID: PR407283916255 Amount of Each Receipt this Period
	FEC ID number of contributing		00720 0104	
	federal political committee.	C		40.00
	Name of Employer LOS ALAMITOS MEDICAL CENT-	Occupation	n	7
	ER Receipt For:	CEO	e Year-to-Date ▼	_
	Primary General	Aggregate	real-10-Date V	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	0 0	520.00	Weekly)
_	Full Name (Last, First, Middle Initial)			B. (B.)
J.	KEN WHEAT Mailing Address PALM DESERT			Date of Receipt
	Walling Address PALIVI DESERT			MI MI / D D / Y O Y O Y
	City	State	Zip Code	Transaction ID: PR407288716255
	Palm Desert	CA	92211-8934	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		20.00
	Name of Employer DESERT REGIONAL MEDICAL	Occupation	n	
	CENTER	CFO		
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	1 222 1 11 12 12 12
	Other (specify) ▼		260.00	P/R Deduction (\$10.00 Bi- Weekly)
S	UBTOTAL of Receipts This Page (optional)			100.00
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Т	OTAL This Period (last page this line number or	nly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 32 (check only one) X			
Ar or	y information copied from such Reports and St for commercial purposes, other than using the	atements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions			
\setminus	NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORATIO	N PAC					
Α.	Full Name (Last, First, Middle Initial) STEVE CORBEIL			Date of Receipt			
	Mailing Address 2063 KINGSPOINTE D	RIVE		M M / D D / Y Y Y Y			
	City CLARKSON VALLEY	State MO	Zip Code 63005-4484	Transaction ID: PR413940416255 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		40.00			
	Name of Employer TENET HEALTHSYSTEM	Occupation SVP	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 520.00	P/R Deduction (\$20.00 Bi- Weekly)			
В.	Full Name (Last, First, Middle Initial) RICK LYONS			Date of Receipt			
	Mailing Address AGOURA	M M / D D / Y Y Y Y					
	City	State	Zip Code	Transaction ID: PR413941916255			
	Agoura FEC ID number of contributing federal political committee.	CA	91301	Amount of Each Receipt this Period 20.00			
	Name of Employer TWIN CITIES COMMUNITY HOS- PITAL	Occupation CEO	n				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 260.00	P/R Deduction (\$10.00 Bi- Weekly)			
<u> </u>	Full Name (Last, First, Middle Initial) MONICA FRAZER			Date of Receipt			
	Mailing Address 3913 STANFORD			M " M / D " D / Y " Y " Y " Y			
	City DALLAS	State TX	Zip Code 75225-7111	Transaction ID: PR839292216255 Amount of Each Receipt this Period			
	FEC ID number of contributing federal political committee.	C		20.00			
	Name of Employer TENET HEADQUARTERS OFFICE	Occupation VP	n				
	Receipt For:						
	Primary General Other (specify) ▼	0 0	260.00	P/R Deduction (\$10.00 Bi- Weekly)			
s	UBTOTAL of Receipts This Page (optional)			80.00			

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 28/32								
ITEMIZED RECEIPTS			or each category of the	(check only one)								
•	LIMILLO ILLOCK TO		Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17								
Δn	y information copied from such Reports and Stat	ements may	y not he sold or used by any nerso									
or	for commercial purposes, other than using the na	ame and add	dress of any political committee to	solicit contributions from such committee.								
$\overline{\ }$	NAME OF COMMITTEE (In Full)											
\rangle	TENET HEALTHCARE CORPORATION	PAC										
Δ	Full Name (Last, First, Middle Initial) EDWARD MESCO			Date of Receipt								
•	Mailing Address 7365 NW 54TH STREET	-		M M / D D / Y Y Y Y								
	City	State	Zip Code	Transaction ID: PR839477816255								
	LAUDERHILL	FL	33319-6346	Amount of Each Receipt this Period								
	FEC ID number of contributing		555.5 55.5									
	federal political committee.	C		50.00								
	Name of Employer TENET HEALTHSYSTEM	Occupation DIR	1									
	Receipt For:		Year-to-Date ▼	-								
	Primary General	Aggregate		P/R Deduction (\$25.00 Bi-								
	Other (specify) ▼	0 0	650.00	Weekly)								
	Full Name (Last, First, Middle Initial) VIOLETA L MAZZELLA	Date of Receipt										
٥.	Mailing Address 8816 CANYON LANDS [M M / D D / Y Y Y Y										
	City	State	Zip Code	Transaction ID: PR841454316255								
	PLANO	TX	75025-4221	Amount of Each Receipt this Period								
FEC ID number of contributing federal political committee.				32.00								
TENET LEKNOLIK DTEDS OFFICE I		Occupation MGR	1									
	Receipt For:	Aggregate	Year-to-Date ▼									
	Primary General		416.00	P/R Deduction (\$16.00 Bi-								
	Other (specify) ▼	0 0	410.00	Weekly)								
<u> </u>	Full Name (Last, First, Middle Initial) ANASTASIA B HUINER	Date of Receipt										
•	Mailing Address 614 EAST ALAMAR AVE	Ī.		M M / D D / Y Y Y Y								
	City	State	Zip Code	Turner tion ID DD041557916955								
	SANTA BARBARA	CA	2ip Code 93105-2946	Transaction ID: PR841557816255 Amount of Each Receipt this Period								
	FEC ID number of contributing		00100 2010									
	federal political committee.	С		40.00								
	Name of Employer TENET HEALTHCARE CORPORAT-	7										
	ION-HQ		ESIDENT									
	Receipt For: Primary General	Aggregate	Year-to-Date ▼									
	Other (specify) ▼		500.00	P/R Deduction (\$20.00 Bi- Weekly)								
				122.00								
SI	JBTOTAL of Receipts This Page (optional)			122.00								

S	CHEDULE A (FEC Form 3X)		11	FOR LINE NUMBER: PAGE 29 / 32							
` ,			Use separate schedule(s) or each category of the	(check only one)							
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12							
			, ,	13 14 15 16 17							
An	y information copied from such Reports and Sta for commercial purposes, other than using the r	atements may	not be sold or used by any person	on for the purpose of soliciting contributions							
Or	1 1	iame and add	aress or any political committee to	solicit contributions from such committee.							
	NAME OF COMMITTEE (In Full)	1.040									
	TENET HEALTHCARE CORPORATION	NPAC									
Δ	Full Name (Last, First, Middle Initial) KATHLEEN FARRELL			Date of Receipt							
٠.	Mailing Address 2585 FURLONG STREE	 ≣T		M M / D D / Y Y Y Y							
	01.	01-1-	7'- 0-1-								
	City	State	Zip Code	Transaction ID: PR843355316255							
	BRISTOL	PA	18901	Amount of Each Receipt this Period							
	FEC ID number of contributing federal political committee.	C		20.00							
	Name of Employer WARMINSTER HOSPITAL	Occupation	1	7							
	Receipt For:		Year-to-Date ▼	_							
	Primary General	7.99.094.0	1 1 1 1 1 1 1	P/R Deduction (\$10.00 Bi-							
	Other (specify)		260.00	Weekly)							
				1							
В.	Full Name (Last, First, Middle Initial) SUZANNE KOZEL			Date of Receipt							
	Mailing Address 161 MEADOW RIDGE I	M M / D D / Y Y Y Y									
	City	State	Transaction ID: PR843980416255								
	JONESBORO	NC	27517	Amount of Each Receipt this Period							
FEC ID number of contributing		C		38.60							
	federal political committee. Name of Employer ATLANTA MEDICAL CENTER			56.55							
			1								
		MGR									
	Receipt For:	Aggregate	e Year-to-Date ▼								
	Primary General		501.80	P/R Deduction (\$19.30 Bi-							
	Other (specify)			Weekly)							
_	Full Name (Last, First, Middle Initial)										
C.	LYNNE SCROGGINS	NE coc		Date of Receipt							
	Mailing Address 3777 PEACHTREE RD	NE 632		M M / D D / Y Y Y Y							
	City	State	Zip Code	Transaction ID: PR844786216255							
	DECATUR	GA	30319	Amount of Each Receipt this Period							
	FEC ID number of contributing	С	20.00								
	federal political committee.	20.00									
Name of Employer ATLANTA MEDICAL CENTER		Occupation	1 ATE ADMINISTRATOR								
		_									
	Receipt For:	Aggregate	Year-to-Date ▼								
	Primary General Other (specify)	, ,	260.00	P/R Deduction (\$10.00 Bi- Weekly)							
	☐ Other (specify) ♥			I Wooding)							
۹	UBTOTAL of Receipts This Page (optional)			78.60							
\vdash											

SCHEDULE A (FEC Form 3X)

Other (specify)

PAGE 30/32 FOR LINE NUMBER: Use separate schedule(s) (check only one) or each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORATION PAC Full Name (Last, First, Middle Initial) IRENE CHAVEZ Date of Receipt Mailing Address 2001 No. Oregon Street M M / D D City State Zip Code Transaction ID: PR846339316255 El Paso TX 79902-3368 Amount of Each Receipt this Period FEC ID number of contributing C 40.00 federal political committee. Name of Employer PROVIDENCE MEMORIAL HOSPI-Occupation COO TAL Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$20.00 Bi-520.00 Weekly) Other (specify) Full Name (Last, First, Middle Initial) B. TERRY MURPHY Date of Receipt Mailing Address PASO ROBLES City State Zip Code Transaction ID: PR849021416255 Paso Robles CA 93446-4845 Amount of Each Receipt this Period FEC ID number of contributing C 20.00 federal political committee. Name of Employer
TWIN CITIES COMMUNITY HOS-Occupation CNO **PITAL** Receipt For: Aggregate Year-to-Date ▼ Primary General P/R Deduction (\$10.00 Bi-

260.00

Weekly)

SUBTOTAL of Receipts This Page (optional)	•	60.00
TOTAL This Period (last page this line number only)		2629.52

Image# 27930069881

S	CHEDULE B (FEC Form 3X)	Use sepe	Use seperate schedule(s) for each category of the Detailed Summary Page			FOR LINE NUMBER: PAGE 31 / 32 (check only one)									
IT	EMIZED DISBURSEMENTS	for each				lly c	ne) 22 28a	X	23 28b		24 28c		25 29		26 30b
	y Information copied from such Reports and for commercial purposes, other than using the													5	
\rangle	NAME OF COMMITTEE (In Full) TENET HEALTHCARE CORPORATION	ION PAC													
۸.	Full Name (Last, First, Middle Initial) Bob Casey for Senate Mailing Address P.O. Box 22469						Transaction ID: 25087097 Date of Disbursement 1 2 0 0 5 7 2 0 0 6								
	City Philadelphia Purpose of Disbursement Bob Casey, US Senate, PA	State PA	Zip Code 19110	01			Amou	nt of	Each	Dis	burser	-	this F	-	d
	X Senate President	isbursement For: X Primary Other (spe	2008 General	Cate Ty	gory/ pe		Bob C	ase	ey, US	S Se	enate,	, PA	A		
	State: PA District:														

SUBTOTAL of Disbursements This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)	•	1000.00

Image# 2793006	9882
Form/Schedule: F3XA Transaction ID:	See memo - Admended FEC Report - 9/30/06 - filed 1/16/07